SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN







Permit #:	19-0084
Date:	5-3-19
Amount Paid:	#75
Refund:	

Checks are made pay	able to: B	ayfield C	County Zoning	Department.		eld Go. Zoning L	λομι.)							
DO NOT START CONS			-		TO APP	PLICANT.				FILL OU	T IN IN	(NO PE	NCIL)		
TYPE OF PERMIT F Owner's Name:	REQUEST	TED—▶	LANI	USE SA	STREET, STREET	SECTION OF A SECTION ASSESSMENT	CONDIT	Control of the same	ACTOR DE L'AND	SPECIAL	USE	☐ B.O.A.	MINISTER STATE	THER	
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23195 M	15511	ONDA	try P	OINTAR		State/Zip: ABLE, W	17 5	12-	2 1				cell Phone	273	
Contractor				VK.	_	ractor Phone:	Plumber:	701	-1				(0533	
57		riumber.		-				lumber P	none:						
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: Agent Mailing Address (include City/Sta												V	Vritten A	uthorization	
														No	
PROJECT	Legal Description: (Use Tay Statement)												ent: (Show	wing Ownership)	
LOCATION	Legui	ССССТР					1 /					17 A		0445	
1/4,	1	./4	Gov't Lot	Lot(s)	CSM	Vol & Page CS	SM Doc#	Lot(s) No	. Blo	ck(s) No.		vision: P		OF	
			1 7			Town of:		3						POINT	
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Shoreland —	. /			1000 feet of La				Structur	e is from	n Shorelin		Floodplain Ye	and the same of th	Present? Ves	
	/	,- 2 y				escontinue —			o is from		e: feet	XNo		XNo	
☐ Nori-Shoreland															
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Value at Time of Completion							Total #			Wh	at Typ	e of		Type of	
* include		Proje	ct	# of Storie	es	Foundation	bedroo	oms			ATTACKS TO SE	y System		Water	
donated time & material							structu	ure		Is on t	he pro	property			
material	□ Nev	v Const	truction	1-Story		☐ Basement	ipal/City	y City							
Ċ	Add	lition/	Alteration	1-Story +	Loft	☐ Foundation		y Specify Type: XWell							
4,000	10-01-010-010	version		☐ 2-Story		X POSTS	ry (Exists	s) Specify Type:							
			existing bldg)									□ Vaulted (min 200 gallon)			
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Proposed Us	e	1				Proposed Struct	ure				Di	mensions		Square	
			Principal	Structure (firs	t struc	cture on property	·)				(X)	Footage	
Pro-2				(i.e. cabin, hu			,		7		(Х)		
V				with Loft		, and the same of						(X)			
Residential	Use			with a Porcl							(Х)		
	-			with (2 nd) Po							(X)		
				with (2 nd) D							(X)		
☐ Commercial	Use			with Attach		rage					(X)		
			Bunkhous	A		sleeping quarter	s, <u>or</u> 🗌 cook	king & foo	d prep fa	cilities)	(Х)	į l	
			10 C C C C C C C C C C C C C C C C C C C	ome (manufacti		ate)				,	(X)		
☐ Municipal U	lse [X	Addition/	Alteration (sp	pecify)	DECK	ADD	ITIO	S		116) X (Z	2)	192	
□ Iviunicipai 0	ise			Building (sp							(x)				
			Accessory	Building Add	ition/	Alteration (specif	⁻ y)				(Х)		
				*										1	
											(Х)		
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			Other: (ex								(Х)		
I (we) declare that this a	pplication (i	including a	ny accompanying	information) has bee	en examir	RTING CONSTRUCTION ned by me (us) and to the	best of my (our)	knowledge a	nd belief it	is true, correc	ct and con	nplete. I (we) a	cknowledge	e that I (we) am	
(are) responsible for the	detail and a	accuracy of	f all information I	(we) am (are) providi	ing and th	hat it will be relied upon b application. I (we) consen	v Bayfield Count	tv in determin	ning wheth	er to issue a p	ermit. I (v	ve) further acce	nt liability	which may be a	
property at any reasonal	ole time for	the purpo	se of inspection.				y	G							
Owner(s): (If there are Multi	ple Owne	rs listed	on the Deed	SEVE!	Sign or I	letter(s) of authoriza	tion must acc	company th	nis applic	ation)	Date	4-	4	-19	

Address to send permit 602 FOX LAKE DRIVE CHARLESTON, IL, 61920

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Authorized Agent: _

Attach Copy of Tax Statement

box below: <u>Draw or Sketch your Property</u> (regardless of what you are applying for) Fill Out in Ink - NO PENCIL (1)**Show Location of: Proposed Construction** Show / Indicate: North (N) on Plot Plan (2)Show Location of (*): (3)(*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (6)Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (7)Show any (*): (*) Wetlands; or (*) Slopes over 20% NE DRIVEWAY NORTH NW Sw Please complete (1) - (7) above (prior to continuing) Changes in pla s must be approved by the Planning & Zoning Dept. (8) Setbacks: (measured to the closest point) Description Measurement Description Measurement Setback from the Centerline of Platted Road Feet Setback from the Lake (ordinary high-water mark) Feet Setback from the Established Right-of-Way Feet Setback from the River, Stream, Creek Feet Setback from the Bank or Bluff Feet Setback from the North Lot Line NE Feet Setback from the South Lot Line Feet Setback from Wetland Feet Setback from the West Lot Line NW Feet 20% Slope Area on the property XNo Yes Setback from the East Lot Line Feet Elevation of Floodplain Feet Setback to Septic Tank or Holding Tank Setback to Well Feet Feet Setback to **Drain Field** YERIF Feet Setback to **Privy** (Portable, Composting) Feet placement or construction of a structure within ten (10) feet of usly surveyed corner or marked by a licensed surveyor at the or ary line from which the setback must be measured must be visible from one previously surveyed corner to the er's expense Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from the previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits. You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900. Sanitary Number: # of bedrooms: Sanitary Date: Issuance Information (County Use Only) Permit Denied (Date): Reason for Denial: Permit Date: Is Parcel a Sub-Standard Lot ☐ Yes (Deed of Record) Mitigation Required ☐ Yes No Affidavit Required ☐ Yes T No Is Parcel in Common Ownership ✓ No ☐ Yes (Fused/Contiguous Lot(s)) Mitigation Attached ☐ Yes Affidavit Attached No ☐ Yes ☐ Yes **□** No Is Structure Non-Conforming No Granted by Variance (B.O.A.) Previously Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #: ☐ Yes ☑ No Case #: Was Parcel Legally Created ✓ Yes □ No Yes Were Property Lines Represented by Owner □ No Was Proposed Building Site Delineated Yes □ No Was Property Surveyed ☐ Yes □ No Inspection Record: **Zoning District Lakes Classification** Date of Inspection: Inspected by: Date of Re-Inspection: Condition(s): Town, Committee or Board Conditions Attached? Yes No - (If No they need to be attached.)

Condition: Construction site best management practices shall be implemented to prevent any erosion or sedimentation onto neighboring properties or wetlands. Necessary UDC permit

shall be obtained.

Hold For TBA:

Signature of Inspector

Hold For Sanitary:

Date of Approval:

City, Village, State or Federal May Also Be Required

or if any prohibitory conditions are violated.

LAND USE - X
SANITARY SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-	0084			Issued	d To: Ja	mes	Severson								
Location:	-	1/4	of	-	1/4	Section	2	Township	43	N.	Range	6	W.	Town of	Namakagon	
Gov't Lot			I	_ot	3	Blo	ock	Su	bdivisio	on P l	lat of Mi	ssic	nary	Point	CSM#	

For: Residential Addition: [1- Story; Deck (16' x 12') = 192 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Construction site best management practices shall be implemented to prevent any erosion or sedimentation onto neighboring properties or wetlands. Necessary UDC permit shall be obtained.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

Tracy Pooler

Authorized Issuing Official

May 3, 2019

Date

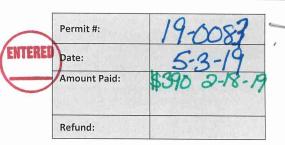
SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County**

Planning and Zoning Depart. PO Box 58

Washburn, WI 54891 (715) 373-6138

BAYFIELD COUNTY, WISCONSIN Date Stamp (Received) FEB 1 5 2019

APPLICATION FOR PERMIT



INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made pay				HAVE BEEN ISSUED TO API	PLICANT.	,		FILL OUT	IN INK (<mark>NO I</mark>	PENCIL)	
TYPE OF PERMIT I	REQUEST	ED-	☐ LANI	D USE SANITAF	RY D PRIVY D	CONDITIONA	AL USE	SPECIAL	USE 🗆 B.O	.A. 🗆	OTHER
Owner's Name:	((()			Mail	ling Address:		/State/Zjp:	,		Telepho	
Mar Tin	Chin)) /	mils	en 1	729 W. SI	bre Dr	Dolati	1/ 1/	VI 63010	248-	761-9045
Address of Property	: 1		4412	City	/State/Zip:	1	POLIC	100	4 12018	Cell Pho	ne:
11244	12 1	30 000	1. Ben	121	able WI	EN/	1				
Contractor:	1	11/20	n ije w	Cont	tractor Phone: F	lumber:				Plumber	Phone:
Biscob	ing !	13111	deas		15-798-3653	3				ridilibei	riiolie.
Authorized Agent: (Person Sign	ing Appli	cation on behal			gent Mailing Ad	ldress (include	City/State,	/Zip):	Written	Authorization
Richard	13	1900	15,45	715.	-798-3653 4	2420 Woan	broat Dr.	Cable	W. 54971	Attache	
PROJECT				Tax		n po wow	VI 65/ YII	UANIO	Recorded Doci	☐ Yes ument: (Sh	owing Ownership)
LOCATIÓN	Legal	Descrip	2008R		24113						
Har NW 4/24	1	./4	Gov't Lot	Lot(s) CSM	24656 Vol & Page CSN	1 Doc # Lot(s) No. Bloc	k(s) No.	Subdivision:		
		1	10		T						
Section	, Towr	nship _	<u>43</u> n, r	ange W	Town of:	alla bon			Lot Size	Acrea	ige /
					VAMI	97140-070				3,	
A STREET				n 300 feet of River, Str		Distance Stru	cture is from	Shoreline	: Is Pro	perty in	Are Wetlands
X Shoreland					yescontinue —			f		ain Zone?	Present?
/	¥ Is P	roperty	/Land within	n 1000 feet of Lake, Po			cture is from		***	Yes	☐ Yes
				If	yescontinue ->		0	f	eet 🙎	No	No
☐ Non-Shoreland											
Value at Time		, the E	The state	No.							
of Completion						# of		Wh	at Type of		Type of
* include		Proje	ct	# of Stories	Foundation	bedrooms			anitary Syster	m	Water
donated time &						in structure			he property?	on	
material	N. Nou	· Canal	w. atlan	- 1 Stame				1/01			property
	/		ruction Alteration	☐ 1-Story	Basement			pal/City	C:C		☐ City
\$ 120		version		☐ 1-Story + Loft	Foundation	2 3			Specify Type:	111	Well
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Proposed Constr	e: (if per uction:	a Busi perty	Principal Residence Bunkhous Mobile H Addition Accessory	Structure (first structure (i.e. cabin, hunting with Loft with a Porch with (2nd) Porch with a Deck with (2nd) Deck with Attached Gase w/ (sanitary, or ome (manufactured decomposed) specify) y Building (specify) y Building Addition/	Length: Length: Length: Cure on property) Shack, etc.) Arage Sleeping quarters, ate) Garage w/ Alteration (specify)	or □ cooking 8	Portabl Compo None Width: Width:	Pit) or le (w/serv	He He He He He He He He	eight: eight:))))))))))))))	Square Footage
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420

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent:

Attach Copy of Tax Statement

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE In the box below: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink – NO PENCIL Show Location of: **Proposed Construction** (2) Show / Indicate: North (N) on Plot Plan (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4) Show: All Existing Structures on your Property (5)Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) Show any (*): (6)(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (7)Show any (*): (*) Wetlands; or (*) Slopes over 20%

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measuren	nent	Description	Measurer	ment
Setback from the Centerline of Platted Road		Feet	Setback from the Lake (ordinary high-water mark)	150	Feet
Setback from the Established Right-of-Way	1000	Feet	Setback from the River, Stream, Creek	-	Feet
	•		Setback from the Bank or Bluff	100	Feet
Setback from the North Lot Line	150	Feet			•
Setback from the South Lot Line	400	Feet	Setback from Wetland		Feet
Setback from the West Lot Line	40	Feet	20% Slope Area on the property	Yes	No
Setback from the East Lot Line	150	Feet	Elevation of Floodplain		F€et
Setback to Septic Tank or Holding Tank	New	Feet	Setback to Well	50	Feet
Setback to Drain Field	30	Feet		,	1000
Setback to Privy (Portable, Composting)		Feet			

other to the placement of construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number: 19	-105	# of bedrooms: 4	Sanitary Date://5/19
Permit Denied (Date):	Reason for Denial:			11.9/1/
Permit#: 19-0083	Permit Date: 5-3	-19		
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming ☐ Yes (Deed of Recor	ious Lot(s)) 🗹 No	Mitigation Required Mitigation Attached	☐ Yes ☑ No ☐ Yes ☑ No	Affidavit Required ☐ Yes ☐ No ☐ Yes ☑ No
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted b	y Variance (B.O.A.) Case	#:
		Were Property Line	es Represented by Owner Was Property Surveyed	Yes
Inspection Record:				Zoning District (R-/)
		1		Lakes Classification ()
Date of Inspection: 24/19	Inspected by:			Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Atta No Food pre No 9:146 of 6et, Necess Maintain f	of within Buald utside of Bathro EARY UDC per	No they need to be atta House MM MITS AS PER STAR		
Signature of Inspector:				Date of Approval: 5/3/19
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗌	Hold For Fees:	

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY - 19-10S
SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-	0083	}		Issued	d To: Ma	artin 8	& Cynthia P	aulse	n & 1	Thomas	Hau	t / Ri	chard Bis	cobing, Agent
Location:	-	1/4	of	_	1/4	Section	13	Township	43	N.	Range	6	W.	Town of	Namakagon
Par in Gov't Lot & Par in NW	3 / Cor	of Se		_ot - 43		Blo	ock	Sul	bdivisio	on	•			CSM#	

For: Residential Accessory Structure: [2- Story; Garage (27' x 38') = 1,026 sq. ft.;

2nd Story Bunkhouse = 496 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): No food prep within bunkhouse. No sinks outside of bathroom. Get necessary UDC permits.

Maintain POWTS (septic) as per State Laws.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

May 3, 2019

Date